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RESTRICTION REQUIREMENT/ AMENDMENT

Fax to:

Examiner Andrea M. Valenti
U.S. Patent and Trademark Office
Group Art Unit 3643
(703) 872-9306

At Fax Number:

From:

Theodore J. Long

Date:

July 7, 2004

Time:

4:30 RvB

Our Reference:

RELAPR-2

This transmission has 17 pages (including this sheet)

There follows the following documents in Application No.
10/682,270.

- ** PTO/SB/21 Transmittal Form (1 p)
- ** PTO/SB/06 Patent Application Fee Determination Record (1 p)
- ** Response to Requirement to Elect Species (14 pp)

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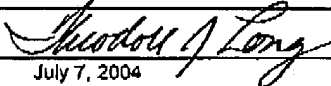
PTO/SB/21 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(To be used for all correspondence after initial filing)</i>		Application Number	10/682,270	
		Filing Date	October 9, 2003	
		First Named Inventor	Dean R. Thronsdon	
		Group Art Unit	3643	
		Examiner Name	Andrea M. Valenti	
Total Number of Pages in This Submission		Attorney Docket Number	RELAPR-2	
☐ Fee Transmittal Form ☐ Fee Attached ☒ Amendment / Response ☐ After Final ☐ Affidavits/declaration(s) ☐ Extension of Time Request ☐ Express Abandonment Request ☐ Information Disclosure Statement ☐ Certified Copy of Priority Document(s) ☐ Response to Missing Parts/ Incomplete Application ☐ Response to Missing Parts Under 37 CFR 1.52 or 1.53		☐ Assignment Papers <i>(For an Application)</i> ☐ Drawing(s) ☐ Licensing-related Papers ☐ Petition Routing Slip (PTO/SB/69) And Accompanying Petition ☐ To Convert a Provisional Application ☐ Power of Attorney, Revocation Change of Correspondence Address ☐ Terminal Disclaimer ☐ Small Entity Statement ☐ Request for Refund		
		☐ After Allowance Communication To Group ☐ Appeal Communication to Board Of Appeals and Interferences ☐ Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> ☐ Proprietary Information ☐ Status Letter ☒ Additional Enclosure(s) <i>(Please identify below):</i>		
		PTO/SB/06 – Patent Application Fee Determination Record		
		Remarks		
		The Commissioner is hereby authorized to charge any additional fees that may be required with respect to this communication, or credit any overpayment, to Deposit Account No. 15-0660. A duplicate copy of this letter is enclosed.		
		SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
		Firm or Individual name	Theodore J. Long, Reg. No. 20648	
		Signature		
		Date	July 7, 2004	
		CERTIFICATE OF FACSIMILE TRANSMISSION		
I hereby certify that this correspondence is being facsimile transmitted to United States Patent & Trademark Office on this date: July 7, 2004				
Typed or printed name	Theodore J. Long, Reg. No. 20648			

PTO/SB/06 (11-90)

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number RELAPR-2
App. No.: 10/682,270

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
Total Claims	36 minus 20 =	16
Independent Claims	3 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT		
*If the difference in column 1 is less than zero, enter "0" in column 2.		

RATE	FEE
x \$ 9	=
x 42	=
+130	=
TOTAL	

RATE	FEE
x \$18	= \$760.00
x 84	=
+260	=
TOTAL	\$760.00

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

AMENDMENT A		Claims Remaining After Amendment		Highest Number Previously Paid For	Present Extra
	Total	40	Minus	36	4
	Independent	3	Minus	3	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

Rate	Additional Fee
x \$9.00	= \$36.00
x \$43.00	= \$0.00
+	=
Total Addit. Fee	\$36.00

Rate	Additional Fee
x \$18.00	= \$72.00
x \$86.00	= \$0.00
+	=
Total Addit. Fee	\$72.00

AMENDMENT B		Claims Remaining After Amendment		Highest Number Previously Paid For	Present Extra
	Total	0	Minus	**	0
	Independent	0	Minus	***	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

Rate	Additional Fee
x \$	=
x	=
+	=
Total Addit. Fee	

Rate	Additional Fee
x \$	=
x	=
+	=
Total Addit. Fee	

AMENDMENT C		Claims Remaining After Amendment		Highest Number Previously Paid For	Present Extra
	Total	0	Minus	**	0
	Independent	0	Minus	***	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

Rate	Additional Fee
x \$	=
x	=
x	=
Total Addit. Fee	

Rate	Additional Fee
x \$	=
x	=
+	=
Total Addit. Fee	

*If the entry in column 1 is less than the entry in column 2, write "0" in column 3

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PTO/SB/06 (11-90)

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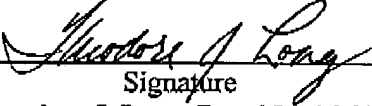
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In The United States Patent And Trademark Office

Applicant: Throndsen, et al. Date: July 7, 2004
Date Filed: October 9, 2003 Docket No.: RELAPR-2
App. No.: 10/682,270 Art Unit: 3643
For: Improved Bedding for Livestock Examiner: Andrea M. Valenti

Certificate of Facsimile Transmission I hereby certify that this paper is being facsimile transmitted to the U.S. Patent and Trademark Office facsimile number (703) 872-9306 on July 7, 2004.  _____ Signature <u>Theodore J. Long, Reg. No. 20648</u> Name of applicant, assignee or Registered Representative
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Response to Requirement to Elect Species

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated June 7, 2004, please amend the application as follows: